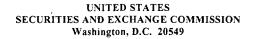
FORM D



FORM D

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response.....16.00





NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

UNIFOR	M LIMITED OFFERING EXEM	PTION
Name of Offering (check if this is an amendment BW Bancorp Rights Offering	nt and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule Type of Filing: New Filing Amendment	504 Rule 505 Rule 506 Section 4(6)	ULOE THE THE THE TABLE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer		· ·
Name of Issuer (check if this is an amendment at BW Bancorp	and name has changed, and indicate change.)	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2230 Eagle Creek Lane, Suite A; Woodbury,	, MN 55129	(651) 436-3220
Address of Principal Business Operations (if different from Executive Offices) same as above	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
Bank holding company		PROCESSED
	partnership, already formed other (p	lease specify): FEB 0 9 2005 E
Actual or Estimated Date of Incorporation or Organization: (Enter CN f		2 22 27 20 40 4 42 20
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securi 77d(6).	ities in reliance on an exemption under Regulation D o	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 and Exchange Commission (SEC) on the earlier of the		

which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

A: BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and r	managing partner o	f part	nership issuers.						
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	V	Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Nigh, John									
Business or Residence Addre P.O. Box 2757, Cheyenr		Street	t, City, State, Zip Co	de)					
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner	Z	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Brown, John									
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					
3105 30th Ave. S.W., Far	go, ND 58103			_					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Smith, Dale	if individual)								
Business or Residence Addre	ess (Number and	Street	t, City, State, Zip Co	de)					*************************************
2230 Eagle Creek Lane,	Suite A, Woodbu	ury, N	/N 55129						<u> </u>
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	V	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Harrington, Stuart									
Business or Residence Addre	ess (Number and	Street	t, City, State, Zip Co	de)					
18224 Hermitage Way, I	Minnetonka, MN	553	45						
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	V	Director		General and/or Managing Partner
Full Name (Last name first, Mueller, Craig	f individual)			-			. , , , , , , , , , , , , , , , , , , ,		
Business or Residence Addre 39 Locust Street, Mahtor			t, City, State, Zip Co	(de)					
Check Box(es) that Apply:	Promoter		Beneficial Owner	V	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, Scott, Patrick	if individual)			_					
Business or Residence Addre 2230 Eagle Creek Lane,				de)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)		· · · · · · · · · · · · · · · · · · ·		·				
Business or Residence Addre	ess (Number and	Stree	t, City, State, Zip Co	de)					,
	(Use bla	nk sh	eet, or copy and use	additi	onal copies of this s	heet, a	as necessary	<i>'</i>)	

4/246	. Pur				B. 11	NFORMAT:	ION ABOU	T OFFERI	NG		a de la companya de		garante para di Santa Para di Santa di Santa
1. I	Has the	issuer sold	l, or does th	e issuer ir	ntend to se	ll, to non-a	ccredited i	nvestors in	this offeri	ng?		Yes	No □
	Answer also in Appendix, Column 2, if filing under ULOE.												
2. V	2. What is the minimum investment that will be accepted from any individual?							\$_0.0	0				
2 [Dogg the	offering.	permit joint	ownerchi	n of a sina	la unit?						Yes	No
			-		-						irectly, any	X	
i (commiss If a perso or states	sion or sim on to be lis , list the na	ilar remune ted is an ass	ration for s ociated pe roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok re than five	ers in conne ter or deale e (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t EC and/or	he offering. with a state ons of such		
Full 1	Name (I	_ast name	first, if indi	vidual)	-	•						• 11	
Busir	ness or l	Residence	Address (N	umber and	d Street, Ci	ty, State, Z	Cip Code)						
Name	e of Ass	ociated Br	oker or De	aler									
State	s in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
((Check '	"All States	" or check	individual	States)	,.,.,		•••••			······	☐ All	States
[AL	AK	ĀZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
-	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK WI	OR WY	PA PR
Ĺ	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	W I	[FK]
Full 1	Name (I	Last name	first, if indi	vidual)									
Busir	ness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)						
Name	e of Ass	ociated Br	oker or De	aler									
State	s in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
			" or check								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ All	l States
_													[77]
-	AL IL	AK IN	[AZ]	KS KS	CA KY	LA LA	CT ME	DE MD	DC MA	FL MI	GA MN	MS	ID MO
_	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
[RI	SC	SD	TN	TX	UT	VT	VA	$\mathbb{W}A$	WV	WI	WY	PR
Full 1	Name (I	Last name	first, if indi	vidual)									
Busir	ness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)						
				•			-				· · · · · · · · · · · · · · · · · · ·		
Name	e of Ass	ociated Br	oker or De	aler									
State	s in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				<u> </u>		
((Check	"All States	" or check	individual	States)	•••••	••••••			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		☐ All	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY NJ	LA NM	ME	MD	MA ND	MI OH	MN)	MS OR	MO
	MT RI	NE SC	NV SD	NH) TN	TX	UT	NY VT	NC VA	WA	WV	OK WI	WY	PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

••	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sum \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	:		
	Type of Security	Aggregate Offering Pric	е	Amount Already Sold
	Debt	\$		\$
	Equity	\$ 5,250,000.	00	\$ 4,500,006.00
	☑ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests	\$		
	Other (Specify)	\$		\$
	Total			
	Answer also in Appendix, Column 3, if filing under ULOE.		_	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors			\$ 3,830,631.00
	Non-accredited Investors			\$_669,375.00
	Total (for filings under Rule 504 only)		_	\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A		_	\$
	Rule 504			\$
	Total		_	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$ 3,900.00
	Legal Fees	•••••		\$ 48,100.00
	Accounting Fees			\$ 12,700.00
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)		\Box	\$
	Total			\$ 64,700.00

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gro	oss .	\$ <u>5,185,300</u>
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate a f the payments listed must equal the adjusted gro	nd	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🗍 \$	¬ \$
	Purchase of real estate			
	Purchase, rental or leasing and installation of mac	hinery	_	_
	Construction or leasing of plant buildings and fac-			_
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	 □ \$	\$	
	Repayment of indebtedness	_	_	
	Working capital (Retained by issurer)		🗆 💲	\$ 185,300
	Other (specify): Contribution of working capital	to Boundary Waters Bank,	X \$ 3,000,000	☐\$
	a wholly owned subsidiary of the Issuer		_	
			_ 	\$
	Column Totals		🕱 \$ 3,000,000	X \$ 2,185,300.0
	Total Payments Listed (column totals added)			
		D. FEDERAL SIGNATURE		
sign	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acci	undersigned duly authorized person. If this no nish to the U.S. Securities and Exchange Com	tice is filed under Ru mission, upon writte	le 505, the following
ssu	ner (Print or Type)	Signature /	Date	
	V Bancorp	While M. It	2-4-0	5
Var	ne of Signer (Print or Type)	Title of Signer (Print or Type)	. •	-
)ale	e M. Smith	President		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)